

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

U.S. Serial No. 10/520,601	)	I hereby certify that this submission is
Applicant: Christopher Stevens	)	being electronically submitted to the
Filed: August 2, 2005	)	Commissioner for Patents
TC/AU: 3716	)	on
Examiner: Ryan Hsu	)	<b>October 25, 2010</b>
Docket No.: 20177/30782003	)	<u>/Christopher N. George/</u>
Confirmation No. 5954	)	Christopher N. George
	)	Registration No. 51,728

**AMENDMENT TRANSMITTAL WITH**  
**PETITION FOR EXTENSION OF TIME**

Mail Stop AF  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, Virginia 22313-1450

Sir:

Transmitted herewith is a response to the Office action dated July 21, 2010, pending  
in the above application.

**1. Small Entity Status**

- ☐ Verified statement(s) claiming small entity status is(are) attached.
- ☐ Small entity status has been established and is still effective.
- ☒ Has not been established.

**2. Extension of Time**

- ☒ This is a petition for an extension of time under 37 CFR 1.136 for the total number of months checked below:

EXTENSION (Months)	FEE FOR LARGE ENTITY		FEE FOR SMALL ENTITY	
One Month	X	\$130.00		\$65.00
Two Months		\$490.00		\$245.00
Three Months		\$1,110.00		\$555.00
Four Months		\$1,730.00		\$865.00
Fifth Month		\$2,350.00		\$1,175.00

**If an additional Extension of Time is required, please consider this a petition therefor.**

Extension Fee: \$130.00

- ☐ An extension for            month(s) has already been secured and the fee paid therefor of \$            is deducted from the total fee due for the total months of extension now requested.

Deduction: \$

**Extension Fee Due With This Request \$130.00**

### 3. Fee for Claims

- ☒ The fee for additional claims [(37 CFR 1.16(b)-(d))] has been calculated as shown below:

					SMALL ENTITY		OTHER THAN A SMALL ENTITY	
	Claims Remaining After Amendment	Highest No. Previously Paid For		Present Extra	Rate	Additional Fee	Rate	Additional Fee
TOTAL	6	MINUS	30	=0	x26=	\$	x52=	\$0
INDEP.	2	MINUS	4	= 0	x110=	\$	x220=	\$0
First Presentation of Multiple Dependent Claim					+195=	\$	+390=	\$0
TOTAL ADDITIONAL FEE					\$		OR	\$0

### 4. Method of Payment of Fees

- ☐ Charge Deposit Account No. 50-2455 in the amount of: \$0.00
- ☒ Electronic Funds Transfer **\$ 130.00**
- ☐ No Payment Due

### 5. Deposit Account and Refund Authorization

The Commissioner is hereby authorized to charge any deficiency in the amount enclosed or any additional fees which may be required during the pendency of this application under 37 CFR 1.16 or 1.17 to Deposit Account No. 50-2455.

Please refund any overpayment to Hanley, Flight & Zimmerman, LLC at the address below.

Please direct all correspondence for this matter to the address associated with USPTO Customer Number 34431.

Respectfully submitted,

HANLEY, FLIGHT & ZIMMERMAN, LLC  
150 South Wacker Drive, Suite 2100  
Chicago, Illinois 60606  
(312) 580-1020

By: /Christopher N. George/  
Christopher N. George  
Registration No.: 51,728  
Attorney for Applicants

October 25, 2010